upper

sald #5

## ☐ Ms./Artist ROTTMATER Mr./Artist Permanent 607 S. COURT Daytime Tel. (216) 723-4335 44256 Temporary or Studio Address Street City Daytime Tel. ( Zip area If you do not presently live in one of the counties of the Western Reserve, in which county were you born? Collaborator (if any) \_\_

If May Show entries are not accepted or are not sold:

- Artist will pick up at Museum.
- ☐ Museum should dispose of.

**Entry Blank—Ple** 

☐ Museum should ship to artist at artist's expense:

PL\$2340 7/26 \(\Sigma\) #42026

Street

City

State

Zip

## **Special Instructions**

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until July 17, 1988.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature Thythe

I have received the unsold/unaccepted object(s) in good condition.

gnature received the unsold/unaccepted objects) in good condition.

## **Entry Blanks**

Materials used (media):

OIL

Detach entire portion along dotted line and submit with slides, but retain tags

Paintings

☐ Sculpture

ON

) # 23 %	) M	W2_
Insurance Value if NFS Only	Size 72 x height x width	
GRAPHICS AND PHOTOGRAPH	Y ONLY	
Total No. in Edition	Price Unframed	Price of Frame
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ngs 🗆 Graphics	☐ Photogr	raphy ecify category)
CANVAS		
THY PIETURE		
Insurance Value If NFS Only	Size 50 x 46 x 2 height x width x depth	
GRAPHICS AND PHOTOGRAPH	Y ONLY	
Total No. in Edition	Price Unframed	Price of Frame
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☐ Graphics

☐ Crafts

CANVAS

☐ Photography

(specify category)